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ABSTRACT

The last of a series of booklets on attitudinal barriers examines attitudes toward people with mental retardation. Five myths (including that mentally retarded people have abnormally strong sex drives which they can't control) are discussed, and five scenes portraying negative attitudes are presented. Seven suggested actions when meeting a person with mental retardation are provided along with general advocacy considerations. (CL)

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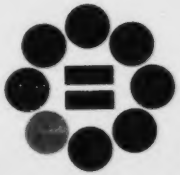

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TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC) AND USERS OF THE ERIC SYSTEM."

PREFACE

This booklet is the fifth in a series on attitudinal barriers facing disabled citizens. Booklet #1, *The Invisible Battle*, discusses attitudinal barriers faced by the disabled community in general. Booklet #2, *Beyond the Sound Barrier*, addresses barriers encountered by deaf and hearing-impaired citizens. Booklet #3, *Free Wheeling*, deals with barriers confronting wheelchair users. Booklet #4, *Counterpoint*, addresses attitudes held by disabled people toward nondisabled people.

This booklet, *Dignity*, draws attention to the negative attitudes faced by people with mental retardation.

This series of booklets, entitled *Barrier Awareness*, is prepared with the support of DHEW/RSA Grant #15-P-57882/3-04 and the School of Education and Human Development, George Washington University. The points of view expressed herein do not necessarily represent the official policy or position of these organizations.

Members of the staff of the Regional Rehabilitation Research Institute on Attitudinal, Legal and Leisure Barriers who have contributed to this publication include: Jeff Strully, Sharon Mistler, and Debra Cornelius. Drawings are by Carol C. Netter.

- In 1971, a bill was introduced into the Florida legislature calling for the euthanasia (mercy killing) of all people with IQ's under 50.

- "I think it is the time for every American state to put its idiotic population under custodial care, not for a day or a week, but permanent care. If you are going to shut up all the idiotic and feebleminded where they can do no harm, you must do it in some cheap way..."

  —*MR 76 - MR Past and Present*
  Comment by Dr. Walk, pg. 8.

- "During her eleven years at Pennhurst [an institution], as a result of attacks and accidents, she has lost several teeth and suffered a fractured jaw, fractured fingers, a fractured toe, and numerous lacerations, cuts, scratches and bites... She no longer speaks."

  —Judge Broderick's opinion
  Halderman v. Pennhurst, 1977
  Civil Action #74-1345, page 34.

"Retard," "mongoloid," "dummy," "vegetable," have been used for years to describe people who are mentally retarded. Poster children, bike-hikes and money trees have been the fund raising techniques most often employed to solicit money for citizens with mental retardation. People with mental retardation were stared at and shunned by society. And to get them out of sight, people with mental retardation were warehoused in institutions. Few individuals believed that people with mental retardation were human beings with rights, feelings, wishes and hopes - let alone fellow citizens.

People who are mentally retarded are people first, last and always. They are individuals as different from each other as you or I. They may need, in certain cases, assistance or modifications in their environment; but don't we all? Persons with mental retardation are entitled to a chance to choose. They deserve dignity and respect, not pity, charity or sorrow.

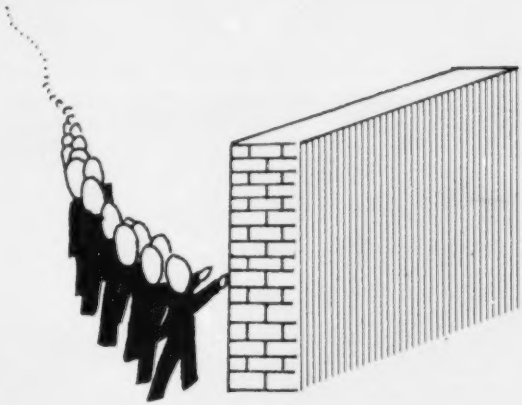
One of the slogans of the National Association for Retarded Citizens says it all: "Your attitude is my biggest handicap." This booklet wants to help overcome negative attitudes toward persons with mental retardation by pointing out some harmful attitudes and myths, and offering suggestions on what you can do to improve the quality of life for citizens with mental retardation.

PEOPLE WHO ARE MENTALLY RETARDED

The Population

There are over 6,500,000 people who are mentally retarded living in the United States, approximately 3% of the U.S. population. Persons with mental retardation differ in many ways, including degree of retardation. In fact, approximately 90% of all retardation is considered mild. The range of retardation goes from mild, to moderate, to severe, and finally, to profound. You may know someone who is mentally retarded and you may not even know it. Most people will know someone or will have a close family member who has mental retardation. Of all disabled people, persons with mental retardation will face some of the most severe attitudinal barriers.

This booklet was written about those persons who are mentally retarded and are having problems achieving their full potential because of attitudinal barriers.



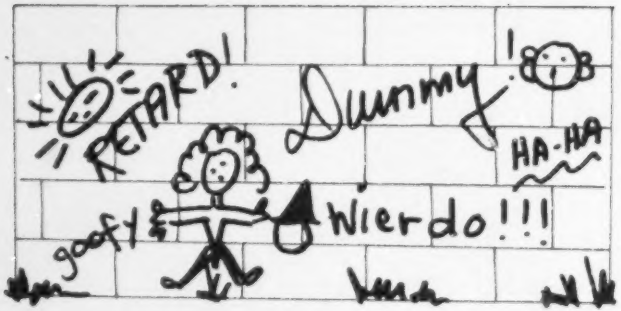
WHAT ARE ATTITUDINAL BARRIERS?

Prejudice	Discrimination
Ignorance	Dislike
Fear	Invisibility
Insensitivity	Insecurity
Bigotry	Discomfort
Stereotyping	Condescension
Misconception	Intolerance

The above words have all been used in association with or in definitions of attitudinal barriers. For this booklet, "attitudinal barriers" has been defined as "a way of thinking or feeling resulting in behavior that limits the potential of disabled people to be independent individuals."

MYTH:
Mental retardation cannot be prevented.

FACT:
There are over 200 causes of mental retardation. Social, environmental, medical and cultural deprivation account for most retardation, and these causes *can* be prevented. With early detection and screening, family education, and good medical care, much mental retardation can be stopped or prevented.

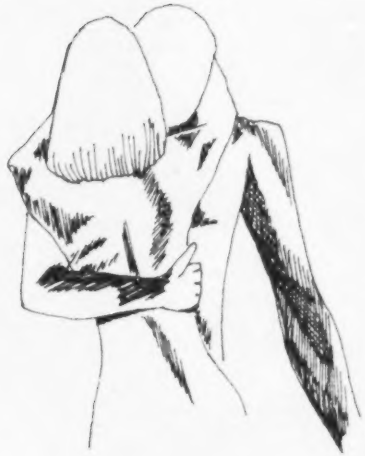


MYTH:
Property values go down when group homes of people with mental retardation move into the community.

FACT:
Many citizens believe this myth. Property values *do not* decline because group homes come into neighborhoods. This excuse is used by neighborhood groups who are afraid to include citizens with mental retardation in their community. It has no factual basis. A person with mental retardation is as good a neighbor as anyone else moving into the community. The basis of this myth lies in fear of having anyone "different" living in the community. Blacks, Jews, and other minorities have been fighting this stereotype for many years.

MYTH:
People who are mentally retarded have abnormally strong sex drives which they can't control.

FACT:
Citizens with mental retardation have the same needs and feelings as any other people. They do not have any stronger desires or needs than anyone else. Because people with mental retardation may be less inhibited about social interaction than other folks, their openness and friendliness is often misinterpreted as being unnatural or frightening. This attitude is unfair and incorrect.



MYTH:
Society has a moral obligation to take care of citizens with mental retardation.

FACT:
Society has a *legal* requirement to guarantee certain basic rights for *all* citizens. These rights include education, training, recreation, and community living. All persons who are mentally retarded have a right to education and training that is appropriate to their needs and located in a setting with nondisabled people. But society has no moral obligation to patronize or give charity and pity to citizens with mental retardation.

MYTH:
People who are mentally retarded are also mentally ill.

FACT:
Mental retardation is frequently confused with mental illness. Mental retardation refers to a delayed, and sometimes limited, development in learning. At some points in their lives, some people with mental retardation may have experienced social and/or emotional problems. There are no more persons with mental retardation who have mental illness than any other group in our society.

MYTH:
People who are mentally retarded cannot be educated or trained to become useful citizens. They remain children forever.

FACT:
All people with mental retardation can be educated and trained. People who are mentally retarded can live within the community in a variety of noninstitutional settings. The majority of persons with mental retardation can, with adequate education and training, hold competitive jobs. Those people who don't work within the job market need the opportunity to develop to their fullest potential as citizens.

FIVE SCENES

John, a man with mental retardation is working for a firm and his main duty is to work the trash compactor. He has been on his job five years and decides he would like to try another job which is more interesting and might pay more. He talks to his supervisor about "getting ahead." The supervisor misunderstands John. He assumes John wants to "move up the career ladder" into a supervisor's job. The supervisor puts him off, saying that someday they will talk about it again. John is frustrated and angry. He really wants to learn to wash the windows and doesn't understand why he isn't even allowed to try.

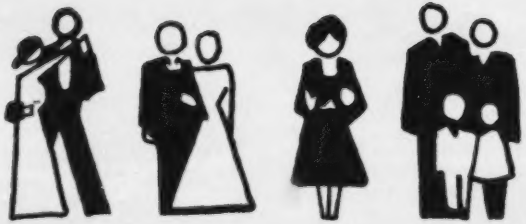
This is an example of a supervisor stereotyping John in a job. John has proved he can do his present job well. The supervisor feels John has "found his place." He doesn't think about John's boredom doing the same job day after day. The supervisor defines "getting ahead" in his own terms. The supervisor should have asked John what he would like to do, and why, and should have thought about giving John a trial period working on new duties. The misunderstanding about "getting ahead" could have been easily clarified if the supervisor had simply discussed John's aspirations with him.

Mr. Bill Todd is a twenty-eight year old person with Down's Syndrome. He is not feeling well and decides to call his doctor. Dr. Goodman says, "Billy, come into my office. Be a good boy and we will see what's the matter with you."

Mr. Todd is hurt and angry. He does not like being called Billy or being considered a "good boy." He thinks of himself as a man. He works, lives in an apartment, and has a girl friend. He doesn't enjoy being treated or talked to like a child. He wishes Dr. Goodman would treat him just like any other patient. Mr. Todd can't understand why he is called "Billy," while every other man is called "Mr." in the doctor's office.

At a recent community meeting, the building of a new "School for the Handicapped" was discussed. Most people favored the segregated building because they were tired of being housed in church basements and old schools vacated by regular education students. Mrs. Paul, a parent of a child with profound retardation, asked the school superintendent why her child couldn't attend classes in the regular school. He replied, "Mrs. Paul, let's be realistic. Children like yours can't be mainstreamed into normal schools." Mrs. Paul is hurt and angry. She can't understand why everyone wants to hide her child away.

Mrs. Paul is right. Her child is mentally retarded, not sick or contagious. Mrs. Paul didn't ask that her child be placed in a regular class, but in a special education class held in the same school as all other children attend. Many people confuse mainstreaming and integration. They think children with mental retardation are being sent to regular education classes in the name of mainstreaming. This is incorrect. A child's educational program is obviously determined by the child's needs. But there's no reason why special classes can't be located in a regular school building. All classes for children with mental retardation can take place in regular school settings. This is integration.



Nancy has mental retardation. She and Bill are getting married and want a family. However, Bill's parents tell him that he and Nancy should not have children. They believe that Nancy would be an "unfit" mother because her mental retardation would prevent her from adequately taking care of and raising a child.

Being a "good" parent is as individual as anything in this world. Some people are naturally effective parents, some must learn to be good parents, and some just struggle through the process of parenting. Being a good parent is not dependent on disability, IQ, or economic status. No one can determine a list of criteria for being a "good" parent. Given support, encouragement, information and guidance, Nancy has the potential to be a good parent. There is no correlation between IQ scores and successful parenting. The most important ingredient is love.

Sandy enjoys bowling and went one night after work with a few women from her office. Afterwards, a bowler told Sandy that she would be better off joining the bowling league sponsored by the local Association for Retarded Citizens, because all her "friends" would be there. Sandy was very hurt. She just wanted to bowl and meet new people. The bowler's remark made her feel different—like she didn't belong.

For years both professionals and the general public believed that people with mental retardation should be "with their own kind." This belief created many of the problems we are now trying to remedy: institutionalization, segregated education, and lack of communication with people who are mentally retarded. Citizens with mental retardation are not better off in segregated settings. Everyone needs to be exposed to different people and ideas to develop into well-rounded, interesting individuals. Segregation only furthers stereotypes and points out differences among people.

WHEN YOU MEET A PERSON WITH MENTAL RETARDATION...

1. When talking with someone who is mentally retarded, keep your concepts clear and concise. Use fewer complex sentences. But it is inappropriate to change the inflection or tone of your voice. *Don't talk down* to someone with mental retardation. The quality of your conversation won't change by making your points clear and easy to understand.

2. It's OK to offer help (e.g., reading the menu, explaining directions), but wait until your offer is accepted before doing anything. *You* may think someone needs help doing something, but they may prefer to do it themselves. Ask first.

3. Don't assume that a person with mental retardation is sick. Mental retardation is not an illness. It is not contagious, and does not cause health problems.

4. Don't take advantage of a person who is mentally retarded. Sometimes their friendliness and "eager to please" attitude encourages people to ask them to do excessive favors and chores. Don't ask people with mental retardation to do anything you wouldn't ask other folks to do for you.

5. Keep in mind that most people with mental retardation have the same activities of daily living as you do. Many people with mental retardation find it impossible to get a cab to stop for them or to have a clerk wait on them in stores. Remember that people with mental retardation are customers and patrons, and deserve equal attention when shopping, dining, or traveling.

6. In some cases a person with mental retardation may seem to react to situations in an unconventional manner or may appear to be ignoring you. Remember that a lack of response or a slow response doesn't necessarily mean the person is being rude to you. A person who has mental retardation may simply be slower to respond.

7. Interact with the person with mental retardation as a person, first. Talk to adults with mental retardation as adults, not as if they were children. Citizens with mental retardation deserve the same respect and dignity as all other people.

WHAT CAN YOU DO?

1. Include citizens with mental retardation on task forces dealing with community planning (recreation, transportation, education, zoning) so that the community will meet the needs of all people. Include representatives for people with mental retardation when appropriate.
2. Be sure that employees with mental retardation have a voice on planning committees that have employee representation.
3. Encourage community groups (Kiwanis, Lions, Jaycees, PTA) to have programs about mental retardation. Make sure that people with mental retardation and, when appropriate, their representatives are included in the planning and presentation of the programs.
4. When you read or view a presentation that reflects a positive image of mentally retarded people (i.e., as productive citizens) write a complimentary comment to the publication or station carrying it.
5. If you have a child, friend or relative who has mental retardation, talk to other people who have personal relationships with people who are mentally retarded. In many cases, your concerns and fears can be overcome and corrected by sharing information with others.
6. When you read or view a presentation portraying people with mental retardation in a negative or condescending way (sick, maladjusted, nonproductive), write a letter of protest to the involved newspaper, magazine, or television station.
7. When you hear people using terms like "retard," politely and firmly explain to them the term is offensive, like using the term "nigger." Many people, especially children, just don't realize they are being insensitive.
8. Answer children's questions about people with mental retardation. Questions are normal. Remember that children get their information and attitudes from your behavior. Kids learn through imitation.
9. If a person with mental retardation feels (s)he can do something, but you can't understand how, ask the person. Talking things over makes things a lot clearer for both people.
10. Experience is the best teacher. Get to know people with mental retardation, and you will see your misconceptions disappear.

FOR MORE INFORMATION

Perske, Robert. *New Directions for Parents of Persons Who Are Retarded.* Abingdon Press, 1973. 64 pgs. $1.95.
Horrobin, J.M. and Rynders, J.E. *To Give an Edge.* Colwell Press, Inc., 500 South 7th St., Minneapolis, Minn. 55415. $2.00

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